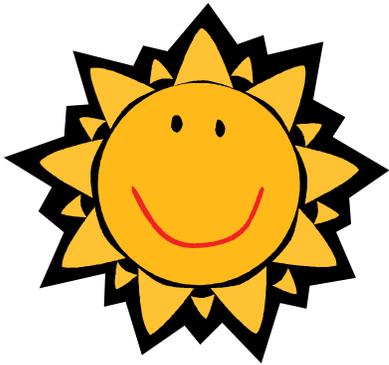


Newington Parks & Recreation

Playground Pals 2014

Where great summers begin!



Extended Care Options Available!

Mornings: 8:00 to 9:00 a.m.

and/or

Afternoons: 2:00 to 4:00 p.m.

OUR PROGRAM

is a great opportunity to meet new friends, develop respect, build self-esteem, and participate in activities in a safe and friendly atmosphere.

OUR ACTIVITIES

include field trips, cookouts, special events, free swim, swim instruction, sports and group games, special guests, theme days, music, crafts and nature activities.

OUR STAFF

work to provide a positive experience for all participants. Our staff is selected on the basis of their skills and talents, as well as their enthusiasm.

~ June 23rd to August 8th ~

Open to children who reside in Newington and are registered for fall Kindergarten or completed Kindergarten this school year.

REGISTER EARLY—SPACE IS LIMITED!

PROGRAM INFORMATION

Our staff is planning an action-packed summer for your child that will include exciting field trips and special events! Registrants may sign up for all sessions. The ratio is approximately 1 staff member to 10 children. **The Playground Pals program is held in the Mortensen Community Center gymnasium.** Children should arrive to camp each day with a bagged lunch, snacks and beverages. Children will participate in swim instruction and are asked to wear a bathing suit and bring a towel every day.

REGISTRATION INFORMATION

ELIGIBILITY: Open to children who reside in Newington and are registered for fall Kindergarten or completed Kindergarten this school year. Those who completed 1st grade this school year are not eligible for this program. **Registration for this program is limited and accepted on a first-come, first-served basis.**

TIME: Staffed daily from 9:00 a.m. - 2:00 p.m. (extended care hours are also available from 8:00 - 9:00 a.m. and/or from 2:00 - 4:00 p.m.)

DATES: The program runs Monday through Friday, June 23rd to August 8th. There is no program on Friday, July 4th.

PAYMENT: Payment is due at time of registration. Payment in the form of cash, check, or credit card is accepted. Register by June 4th for additional savings! You must enroll in all desired weeks at the time of initial registration to take advantage of multiple-week discounts.

EXTENDED CARE HOURS

Extended care hours are available from 8:00 to 9:00 a.m. and/or 2:00 to 4:00 p.m. for an additional fee (see Registration Form for fees).

CONTACT INFORMATION

- Parks & Recreation, 131 Cedar Street, Newington, CT 06111
- Office Hours: Monday through Friday, 8:30 a.m. until 4:30 p.m.
- Phone: 860-665-8666 Fax: 860-665-8739 Web: www.newingtonct.gov
- Pool & Playground Pals Hotline: 860-665-8766

Register by mail, fax or in person

Playground Pals 2014

Here are answers to questions you may have about Playground Pals:

MEDICATIONS / ALLERGIES AND / OR SPECIAL NEEDS

If your child has any food allergies, medical concerns or special needs, the following forms must be completed and submitted to the Parks & Recreation office at the time of registration. **Registration Forms will not be accepted without required supplemental forms:**

- Medication Administration Policy / Authorization to Assist Program Participants in Self-Medication (must be signed by child's physician)
- Allergy Action Plan (must be signed by child's physician)
- Supplemental Registration Information for Participants with Allergies, Special Needs and/or Disabilities

Please note that our staff is not authorized to dispense medications of any kind.

BEHAVIOR EXPECTATIONS

Participants whose behavior interferes with a positive experience for other children may be subject to dismissal. The discipline procedure is as follows:

Stage One: Discussion with parent/guardian regarding behavior. Report is written up.

Stage Two: Child will be sent home for the remainder of the day and will be suspended from the program the following day.

Stage Three: The child will be sent home for the remainder of the day and suspended for one week's time. A referral to the Newington Human Services Department may be made.

Stage Four: Dismissal from the program.

The Parks & Recreation Department may use discretion in the disciplinary process.

ARRIVAL AND DISMISSAL

Children should be dropped off at 9:00 a.m. in the Mortensen Community Center gymnasium and picked up at 2:00 p.m. in the Mortensen Community Center gymnasium. If your child is pre-registered in the extended care program, early care drop off is at 8:00 a.m. in the Mortensen Community Center gymnasium and late care pickup is at 4:00 p.m. in the gymnasium. Please note that children are not allowed to bring guests to the program.

SIGN IN / SIGN OUT

You will be asked to sign your child in and out daily. Please have a photo ID ready to ensure a quick and easy sign-out. We recommend that parents take the time to meet and talk to your child's counselor. **A child cannot be released to anyone other than those listed on the Registration Form.** Any changes must be made in person by the registering parent or guardian (with proper identification) in the Parks & Recreation office.

WHAT TO BRING

All participants should bring a water bottle, bathing suit, towel, sunscreen, hat, lunch and a snack every day. Be sure to label all of your child's belongings. We are not responsible for lost or stolen items.

LUNCH

You must provide your child's lunch and a daily snack. Please include an ice pack, as there is no refrigeration available. Also, please send a water bottle. We ask that you **do not send your child with nuts or nut products** of any kind due to the prevalence of allergies.

DAILY SCHEDULE (TYPICAL)

Following arrival and opening announcements, the day consists of planned activities, swim instruction, sports, games, arts & crafts, lunch and recreational swim.

SWIM INSTRUCTION

Swim instruction and recreational swim are offered to all participants. All children must participate in swim instruction unless a parent or guardian gives written permission otherwise.

SPECIAL EVENTS & TRIPS

Participants enjoy special events, entertainment and trips at the Playground Pals program. Trips are offered using school bus transportation at no additional fee. Events may include cookouts, talent shows, playground olympics, bowling, movies, magicians, special guests, theme weeks and much more!



RAINY DAY PROCEDURES

Playground Pals is held rain or shine. We try to hold the program outdoors in marginal weather. Please dress children for muddy conditions and pack a change of clothes.

NOTICES AND FLYERS

If your child leaves early or will be away from the program for an extended period of time, check with your child's counselor for information about upcoming trips and other events or activities your child may not want to miss. A newsletter is distributed at the end of every week. You may also call the Summer Playgrounds information line (860-665-8766) for more details.

STAFF TRAINING

The Newington Parks and Recreation Department requires all staff to attend an extensive Orientation and Training program to prepare them for the needs and demands of the program.

LATE PICK-UP FEE

An additional fee may be assessed for any participant who is repeatedly picked up late at the end of the day.

REFUNDS

No refunds will be given once you have registered unless participants cannot attend due to injury or illness that prevents participation in the remainder of the Playground Pals program. All refunds must be requested in writing to the Parks & Recreation Department and

PLAYGROUND PALS EXTENDED CARE PROGRAM

The Playground Pals Extended Care program will be staffed from 8:00 to 9:00 a.m. and 2:00 to 4:00 p.m. for those parents who need more time to pick up their child. Fees are:

Morning Extended Care (8 to 9 a.m.)

All 7 weeks: \$120

Any 1 week: \$20

Week 2: \$16 (no program July 4th)

Afternoon Extended Care (2 to 4 p.m.)

All 7 weeks: \$255

Any 1 week: \$40

Week 2: \$32 (no program July 4th)

Please note: If weeks are not purchased at the same time, individual weekly rates apply.

Please retain this information throughout the summer for your records

Playground Pals 2014 Registration Form

(Please Complete All Areas of this Form)

PARTICIPANT INFORMATION

Child's **FIRST** Name: _____ **LAST** Name: _____ Male / Female Age: _____
 Home Phone: _____ Email: _____ DOB: _____
 Address: _____ Town: _____ Zip Code: _____
 Parent 1 Name: _____ Parent 1 Cell: _____ Parent 1 Work Phone: _____
 Parent 2 Name: _____ Parent 2 Cell: _____ Parent 2 Work Phone: _____
 Emergency Contact Information: please provide an additional contact (not residing with you) that we can contact in case a parent/guardian cannot be reached.
 Name: _____ Relationship to Child: _____
 Home Phone: _____ Cell Phone: _____ Work Phone: _____

PICK-UP AUTHORIZATION

I hereby authorize the following person(s) to pick up my child from the Newington Parks & Recreation Department's Playground Pals program. If there are any changes in these arrangements, **I will give written notice in person** (with proper identification) in the Parks & Recreation office. Parent/guardian must be included on this pick-up authorization. Only people listed here are authorized to pick up child.

1. Parent/Guardian Name: (1) _____ (2) _____
2. Name: _____ Phone: _____ Relationship: _____
3. Name: _____ Phone: _____ Relationship: _____
4. Name: _____ Phone: _____ Relationship: _____

REGISTRATION INFORMATION

Grade child is entering in the fall: _____

<i>Please check appropriate box(es)</i>	Week 1 June 23 - 27	Week 2* June 30-July 3 <small>No July 4th</small>	Week 3 July 7 - 11	Week 4 July 14 - 18	Week 5 July 21 - 25	Week 6 July 28 - Aug. 1	Week 7 Aug. 4 - 8
Playground Pals <small>9:00 a.m.—2:00 p.m. Teen Center</small>	<input type="radio"/> ID: 9886	<input type="radio"/> ID: 9887	<input type="radio"/> ID: 9888	<input type="radio"/> ID: 9889	<input type="radio"/> ID: 9890	<input type="radio"/> ID: 9891	<input type="radio"/> ID: 9892
Early Extended Care <small>8:00 a.m.—9:00 a.m. \$20/wk; \$16 for wk 2; \$120 for 7 wks</small>	<input type="radio"/> ID: 9893	<input type="radio"/> ID: 9894	<input type="radio"/> ID: 9895	<input type="radio"/> ID: 9896	<input type="radio"/> ID: 9897	<input type="radio"/> ID: 9898	<input type="radio"/> ID: 9899
Late Extended Care <small>2:00 p.m.—4:00 p.m. \$40/wk; \$32 for wk 2; \$255 for 7 wks</small>	<input type="radio"/> ID: 9900	<input type="radio"/> ID: 9901	<input type="radio"/> ID: 9902	<input type="radio"/> ID: 9903	<input type="radio"/> ID: 9904	<input type="radio"/> ID: 9905	<input type="radio"/> ID: 9906

FEES

You must enroll in all desired weeks at the time of initial registration to take advantage of multiple-week discounts. If weeks are not purchased at the same time, individual weekly rates apply.

Total cost for 7 weeks purchased individually by June 4th is \$650. Total cost for 7 weeks purchased individually after June 4 is \$755.

	By June 4	After June 4
ALL 7 WEEKS:	\$495	\$530
ANY 4 WEEKS:	\$305	\$330
ANY 1 WEEK:	\$ 95	\$110
WEEK 2*:	\$ 80	\$ 95

(No program July 4th)

Total Amount Due: _____

Register by mail, fax (860-665-8739) or in person

Please Circle Payment Method: Cash Check Visa Mastercard Discover
 Checks payable to: Newington Parks & Recreation 131 Cedar St. Newington, CT 06111

Credit Card # _____ Exp. Date ___/___
 Security Code # _____

Signature for Credit Card Use: _____ Date: _____

**** Signature required on the back of this form ****

Please Note: The person signing this form is the only person authorized to make changes on this registration form. All changes must be made in the Parks & Recreation Office with proper identification. Changes cannot be made at Playground Pals site.

Terms and Conditions of Registration

CHILD'S NAME: _____

Incomplete forms will not be accepted. My son/daughter has permission to participate in the Newington Parks & Recreation Playground Pals program. I hereby agree to release, discharge and hold harmless, the Town of Newington, its employees, contracted instructors and volunteers from any liabilities which may occur while participating in the Playground Pals program, including field trips. I understand that participation in any recreational activity involves risk. I further understand that the Town of Newington does not provide accident/medical insurance for program participants.

Unless the Playground Pals program is restricted by a written order directed expressly to the Newington Parks & Recreation Department (1) the Playground Pals program staff is hereby authorized to release the child to either parent (or persons authorized by either parent) at any time during the day or arrangements for pick-up of the child have been made in writing in advance with the Parks & Recreation Office even if both parents do not live at the same address, and (2) both parents are permitted to visit the child at the program. Disputes between parents which involve the Playground Pals program in any way must be resolved immediately by the parents. The Newington Parks & Recreation staff shall have the right to terminate enrollment in the Playground Pals program and dismiss the child if issues are not resolved. Should such action be taken, no refund will be made and the person(s) who signs this Registration Form will, nevertheless, be responsible for all amounts due to the Newington Parks & Recreation Department as if the child had not been dismissed unless otherwise noted in writing by the Department. The parent irrevocably authorizes and gives consent to the Newington Parks & Recreation Department's use of the child's name, photograph, portrait or image in connection with the Playground Pals program's brochure, flyers or other promotional or advertising publication. The parent releases the Town of Newington and shall indemnify and hold the Town of Newington harmless from and against any and all claims, liabilities and expenses (including reasonable attorney's fees) arising from such use.

The Playground Pals program staff shall have the right to make all decisions regarding the participant's fitness to participate in particular activities or the entire Playground Pals program. At any time before the Playground Pals program begins, the Playground Pals program staff shall have the right to cancel enrollment if it determines, in its sole judgment; (1) that the physical, mental or emotional condition of the child would prevent him/her from participating safely and satisfactorily in the Playground Pals program or interacting positively with other children at the Playground Pals program or (2) the child's parent(s)/guardian(s) make an unreasonable demand on the Playground Pals program. Once the program has begun, the Playground Pals program staff shall have the right to terminate enrollment and dismiss the child, if it determines in its sole judgment that the child's: (1) behavior proves detrimental to himself/herself, other participants or staff or property, or (2) behavior displays bigotry, bullying or inappropriate sexual acts, or (3) parent(s)/guardian(s) make an unreasonable demand upon the Playground Pals program, or (4) program fee has not been paid in full prior to the start of the program unless prior arrangements have been made with the Department. The Newington Parks & Recreation Department's Refund Policy states: No refunds will be given once you have registered unless participants cannot attend due to illness or injury that prevents participation in the remainder of the Playground Pals program. All refunds must be requested in writing to the Parks & Recreation Department and require a doctor's note.

Emergency Medical and Surgical Treatment Release

Release: The information contained herein is accurate to the best of my/our knowledge. By my/our signature below, I/we consent to the following:

- A. Release any and all medical, insurance and/or other records to third party, which are in the possession of the Town of Newington or any other party referred to herein.
- B. For the Town of Newington to acquire medical insurance, and/or other data from third parties to be added to this record, and for those third parties to release such information to the Town of Newington.

I/we authorize duly-licensed physicians, nurses and allied health professionals to provide such necessary medical care and to administer such routine diagnostic tests and procedures in the judgment of the authorized personnel as deemed necessary or advisable for the care of the individual person herein. If the information contained herein refers to an individual other than ourselves, I/we am/are their authorized legal representative and/or guardian(s) and am/are hereby authorized to submit this material and execute this release form.

Participants with Medications / Special Needs

You must complete and submit Supplemental Forms for children with special needs and/or if medications need to be taken during Playground Pals program hours. Supplemental Forms MUST BE submitted at the time of registration. Forms are available at the Parks & Recreation Office or online at www.newingtonct.gov.

Parent(s)/guardians(s) represent to the Playground Pals program that written in the space below is his/her/ their child's history of medical conditions or surgical procedures, special needs, therapy programs and/or regularly taken prescription medications:

_____ **No Medical Concerns**
Initials

_____ **No Special Needs**
Initials

Parent(s)/guardian(s) represent to the Playground Pals program that the participant is in sound physical and mental health and fully able to participate in all program activities without need of individual or specialized attention or medical regimen and that the child's health will not impinge or impact negatively on other participants or the Playground Pals program. Parent(s)/guardian(s) agree(s) to advise the Parks & Recreation Department promptly in writing of any change in the child's physical or mental health between the date of enrollment and the start of the Playground Pals program season as well as throughout the dates of the program. The parent(s)/guardian(s) who signs this contract will be responsible for payment of all fees charged by the Playground Pals program.

I/we have read, understand and agree to the above terms and conditions.

SIGNATURE OF PARENT/GUARDIAN 1

PRINTED NAME

DATE

SIGNATURE OF PARENT/GUARDIAN 2

PRINTED NAME

DATE

Only the individual(s) signing this form is/are authorized to make additions or revisions.
All changes must be made in person (with proper identification) in the Parks & Recreation office.